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Atty Docket No. 020154-001210US

PTO FAX NO.: 703-872-9306

ATTENTION: Examiner Hieu Phan

Group Art Unit 3738

**OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Hieu Phan**

CERTIFICATION OF FACSIMILE TRANSMISSION

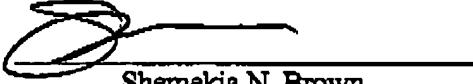
I hereby certify that the following documents in re Application of CIFRA et al., Application No. 10/692,474, filed October 22, 2003 for IMPLANTABLE MEDICAL DEVICES USING ZINC are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal (1 page)
2. Amendment (13 pages)

Number of pages being transmitted, including this page: 15

Dated: 3/14/05



Shemekia N. Brown

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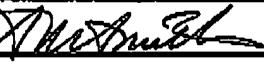
TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834
Telephone: 650-326-2400
Fax: 650-326-2422

60443242 v1

TRANSMITTAL FORM		Application Number	10/692,474
(to be used for all correspondence after initial filing)		Filing Date	October 22, 2003
		First Named Inventor	Cifra, Pamela
		Art Unit	3738
		Examiner Name	Hieu Phan
Total Number of Pages in This Submission	14	Attorney Docket Number	020154-001210US

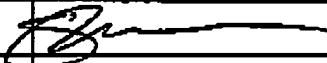
ENCLOSURES (Check all that apply)					
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC			
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<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information			
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter			
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):			
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer				
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund				
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____				
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD				
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		<table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>		Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Scott M. Smith		
Date	3/14/05	Reg. No.	48,268

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PATENT
Attorney Docket No.: 020154-001210US

TOWNSEND and TOWNSEND and CREW LLP

By: 

Shemekia Brown

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

CIFRA et al.

Application No.: 10/692,474

Filed: October 22, 2003

For: IMPLANTABLE MEDICAL
DEVICES USING ZINC

Customer No.: 20350

Confirmation No. 7244

Examiner: Phan, Hieu

Technology Center/Art Unit: 3738

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed 12/16/04, please enter the following
amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this
paper.

Remarks/Arguments begin on page 12 of this paper.